

HOLLAND &amp; KNIGHT

Fax: 8132290134

Jul 22 2003 17:28

P. 01

Law Offices

**HOLLAND & KNIGHT LLP**

400 North Ashley Drive, Suite 2300  
P.O. Box 1288 (ZIP 33601-1288)  
Tampa, Florida 33602-4300

813-227-8500  
FAX 813-228-0134  
http://www.hklaw.com

Duplicate

Annapolis  
Atlanta  
Bethesda  
Boston  
Bradenton  
Chicago  
Fort Lauderdale  
Jacksonville  
Lakeland  
Los Angeles  
Malbourne  
Miami  
New York

Northern Virginia  
Orlando  
Portland  
Providence  
San Antonio  
San Francisco  
Seattle  
St. Petersburg  
Tallahassee  
Tampa  
Washington, D.C.  
West Palm Beach

International Offices:  
Caracas  
Helsinki  
Mexico City  
Rio de Janeiro

São Paulo  
Tel Aviv  
Tokyo  
\*Representative Offices

**FACSIMILE****TO:****USPTO****703-872-9314**

NAME

COMPANY/FIRM

FAX NUMBER

CITY

STATE

(TELEPHONE NUMBER)

**FROM:**

Michael J. Colitz, III

813-227-8500

20

NAME

TELEPHONE

TOTAL PAGES (Including Cover Sheet)

**FOR THE RECORD:**

DATE: July 22, 2003

URGENCY: ☐ SUPER RUSH☐ RUSH☒ REGULAR

FAXED BY:

FILE #: 36470.00008

CLIENT NAME:

CONFIRMED: ☐ YES ☐ NO

NAME:

TIME:

If you did not receive all of  
the pages or find that they  
are illegible, please call  
(813) 227-6350

**CONFIDENTIALITY NOTICE:** This facsimile, along with any documents, files, or attachments, may contain information that is confidential, privileged, or otherwise exempt from disclosure. If you are not the intended recipient or a person responsible for delivering it to the intended recipient, you are hereby notified that any disclosure, copying, printing, distribution or use of any information contained in or attached to this facsimile is strictly prohibited. If you have received this facsimile in error, please immediately notify us by facsimile or by telephone collect at the numbers stated above, and destroy the original facsimile and its attachments without reading, printing, or saving in any manner. Your cooperation is appreciated. Thank you.

**MESSAGE:**

TPA1 #1303622 v1

EXPRESS MAIL CERTIFICATE

"EXPRESS MAIL" MAILING LABEL NUMBER: ER055253565

DATE OF DEPOSIT: 07/22/03

File No. 036470.00008

I HEREBY CERTIFY that the enclosed Transmittal Form; Fee Transmittal Form; Amendment B; Request for Three Month Extension of Time; Change of Correspondence Address; Check in the amount of \$930.00 and return receipt postcard are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated and is addressed to U.S. Patent and Trademark Office, 2011 South Clark Place, Customer Window, Mail Stop Fee Amendment, Crystal Plaza Two, Lobby, Room 1B03, Arlington, VA 22202.

The Commissioner is hereby authorized to charge any additional fees which may be required at any time during the prosecution of this application without specific authorization, or credit any overpayment, to Deposit Account No. 50-1667.

  
Michael J. Colitz, III

TPA1 #1303444 v1

PTO/SB/21 (03-03)

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/393,633	
	Filing Date	08/10/1999	
	First Named Inventor	S. Murad Sarp	
	Att Unit	2645	
	Examiner Name	Escalante, Ovidio	
Total Number of Pages in This Submission	18	Attorney Docket Number	038470.00008

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard; Express Mail Certificate
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Michael J. Colitz, III	
Signature		
Date	07/22/03	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 07/22/03		
Typed or printed	Michael J. Colitz, III	
Signature		
Date	07/22/03	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-788-9199) and select option 2.

Official

PTO/SB/17 (05-03)

Approved for use through 04/30/2003. OMB 0851-0032  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL  
for FY 2003**

Effective 04/01/2003. Fees/charges are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT: \$930.00

Complete if known:

Application Number: 09/383,638  
 Filing Date: 09/10/1999  
 First Named Inventor: S. Murad Sarp  
 Examiner Name: Escalante, Ovidio  
 Agent: 2545  
 Attorney/Doct. No.: 030270 00008

**METHOD OF PAYMENT (check all that apply)**

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None  
☐ Deposit Account  
 Deposit Account Number:   
 Deposit Account Name:   
 The Director is authorized to: (check all that apply)  
☐ Charge fee(s) indicated below ☐ Credit any overpayments  
☐ Charge any additional fee(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.

**FEE CALCULATION (continued)****4. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920	1804	920	Requesting publication of SIR prior to Examiner action	
1805	1,840	1805	1,840	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	830	2253	465	Extension for reply within third month	930.00
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to Institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	620	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(e)	
1808	180	1808	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 930.00

**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1) (\$)					


**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee From Below	Fee Paid
Independent	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)				

\*\*or number previously paid, if greater. For Reissues, see above

**SUBMITTED BY**

Name (Print/Type): Michael J. Colitz II  
 Signature: 

Registration No. 37,010  
 (Attorney/Agent)

(Complete if applicable)

Telephone 813/227-8500

Date 07/22/03

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

CERTIFICATE OF MAILING

I HEREBY CERTIFY that the foregoing Request for Three Month Extension of Time was deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated and is addressed to U.S. Patent and Trademark Office, 2011 South Clark Place, Customer Window, Mail Stop Fee Amendment, Crystal Plaza Two, Lobby, Room 1B03, Arlington, VA 22202 this the 22<sup>nd</sup> day of July, 2003.

The Commissioner is hereby authorized to charge any additional fees which may be required at any time during the prosecution of this application without specific authorization, or credit any overpayment, to Deposit Account Number 50-1667.

  
Michael J. Colitz, III

TPA1 #1303400 v1

**CERTIFICATE OF MAILING**

I HEREBY CERTIFY that the foregoing Amendment B for S/N 09/393,633 was placed in an envelope and mailed via First Class Mail, postage prepaid to: U.S. Patent and Trademark Office, 2011 South Clark Place, Customer Window, Mail Stop Fee Amendment, Crystal Plaza Two, Lobby, Room 1B03, Arlington, VA 22202 on this the 22 day of July, 2003.

  
Michael J. Colitz, III

TPAI #1297310 v1